P09 00000 6355

(Re	questor's Name)	
(Ad	dress)	
(Ad-	dress)	
(Cit	y/State/Zip/Phone #	¥)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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> 2020 OCT 13 PH 4: 54 SECRETARY DE STATE

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COVER LETTER

TO: Amendment Sect Division of Corpo					
NAME OF CORPOR	RATION: POINT OF	- SOME HEA	DOWARTERS INC		
DOCUMENT NUME	BER: P09000	000 6355			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	TL	KA KONDO	ر		
		Name of Contact Persor			
	POINT OF SA	15 USADO	ALTERS TX.		
	POINT OF SALE HEAD DARTERS IN.				
	14048 SW 132 AVE				
		Address			
	MIAMI	Gity/ State and Zip Code	, Ø		
		City/ State and Zip Code	2		
	E-mail address: (to be us	HGAO QUALT sed for future annual report	iotification)		
For further information	n concerning this matter, pleas	se call:			
_ ILK	+ KOHAN	at (305	de & Daytime Telephone Number		
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number		
	r the following amount made				
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	✓S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Mai</u>	ling Address		Address		
Amendment Section			ment Section		
Division of Corporations			n of Corporations		
	Box 6327		entre of Tallahassee		
I alla	ahassee, FL 32314	2410 r	N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

POINT OF SALE HEAD	DAZ-623 OCI 13 PM 1: 54
(Name of Corporation as currently	filed with the FlorIda Dept of State STATE
1090000	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MIA	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	MIG
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	4/4
(Florida sire	et address)
New Registered Office Address:	, Florida
t*	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added;

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Jo</u>	ohn Doe			
X Remove	<u>V</u> <u>N</u>	<u> 1ike Jones</u>	ı		
X Add	<u>sv</u> <u>s</u>	ally Smith	NA		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change					
Add					
Remove					
2) Change					
Add					
Remove 3) Change					
Add					
Remove					
4) Change				<u> </u>	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	al sheets, if necessary). (Be specific)
	N/A
	,
	
	
	
an amendme revisions for	nt provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:
	licable, indicate N/A)
112142	GL OF SHANES CHANGE:
エレ	CA KOHAN 51%
STEP	HAN VOHAN 49%
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	10/2/2020	, if other than the
date this document was signed.	,	
Effective date if applicable:	10/2/2020	·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of	ot meet the applicable statutory filing requirements, th State's records.	is date will not be listed as the
Adoption of Amendment(s) (CH.	ECK ONE)	
☐ The amendment(s) was/were adopted by the i action was not required.	incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendu approval.	nent(s)
	shareholders through voting groups. The following stagroup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by	"	
(voti	ing group)	
Dated	12020	
Signature		
	dent or other officer – if directors or officers have not be rporator – if in the hands of a receiver, trustee, or other by that fiduciary)	
	JUKA KOHAN	
(*	Typed or printed name of person signing)	
	PRESIDENT,	
(PNESIDENT. Title of person signing)	